501 KAR 6:220. Treatment for sex offenders.

RELATES TO: KRS 17.550-17.991

STATUTORY AUTHORITY: KRS 17.564

NECESSITY, FUNCTION, AND CONFORMITY: KRS 17.564 authorizes the Sex Offender Risk Assessment Advisory Board to promulgate administrative regulations to establish the minimum requirements for treatment of sex offenders. This administrative regulation establishes minimum treatment requirements for providers.

Section 1. Definitions. (1) "Approved provider" is defined in KRS 17.550(3).

- (2) "Board" is defined in KRS 17.550(1).
- (3) "Community standards of care" means the standards of care generally accepted by sex offender treatment professionals within the Commonwealth of Kentucky and taking into account the general standards of care for the mental health profession for which the approved provider is licensed or certified.
 - (4) "Department" is defined in KRS 197.010(3).
 - (5) "Treatment services" is defined in KRS 197.420(2)(b).

Section 2. General Procedures for Treatment of All Sex Offenders. (1) Treatment shall conform to community standards of care, and shall include:(a) A diagnosis; and

- (b) A written treatment plan, which shall include:
- 1. Goals and objectives; and
- 2. Modalities of treatment and the rationale therefor.
- (2) Treatment shall be conducted in a psychotherapy format.
- (3) Treatment may utilize psychoeducational components if indicated.
- (4) Prior to providing treatment, an approved provider shall:
- (a) Obtain written informed consent for treatment from the offender;
- (b) Contact the offender's supervising probation and parole officer to discuss the offender and obtain offender information:
 - (c) Make a good faith effort to obtain the offender's mental health records; and
- (d) Submit a general treatment curriculum to the board that includes the required elements in Section 3(1) of this administrative regulation. If the approved provider intends to treat an offender who has already completed a sex offender treatment program, then the approved provider shall also submit a treatment curriculum that includes the required elements in Section 4(2) of this administrative regulation. If an approved provider proposes changes in his submitted treatment curriculum, the approved provider shall submit a treatment curriculum with the changes to the board for approval.
 - (5) An approved provider shall:
- (a) Provide psychological or pharmaco-therapy services or testing as needed or make the appropriate referral and act as liaison for the provision of services;
- (b) Provide treatment consistent with current professional literature which minimizes the risk of reoffending and emphasizes community safety;
- (c) Maintain an individual record which shall include documentation of the offender's attendance and evaluative progress notes;
- (d) Obtain a release of information signed by the sex offender which allows the approved provider to release information to probation and parole personnel responsible for the sex offender's supervision and the Sex Offender Risk Assessment Advisory Board;
- (e) Notify the offender's supervising probation and parole officer in writing if the offender fails to attend a treatment session or fails to make a good faith effort to participate in the

treatment:

- (f) Provide the Required Monthly Progress Report to the supervising probation and parole officer each month;
- (g) Cooperate fully with the probation and parole supervision team responsible for a sex offender under the approved provider's treatment;
 - (h) Prepare a treatment summary at discharge from treatment; and
- (i) Provide written notice of the sex-offender's discharge from treatment and the reason for discharge to the supervising probation and parole officer within ten (10) days of discharge.
- Section 3. Procedures for Treatment of Sex Offenders Who Have Not Completed a Sex Offender Treatment Program. If a sex offender has not completed a sex offender treatment program, an approved provider shall:
 - (1) Use a treatment curriculum which, at a minimum, shall include:
 - (a) Treatment services as may be necessary to meet the needs of the individual offender;
- (b) An emphasis on acceptance of responsibility by the offender for present and past sexual offending behavior;
 - (c) Gender and culture specific programming; and
 - (d) Education of the offender in:
 - 1. The cycle of sexual abuse;
 - 2. Human sexuality;
 - 3. Deviant arousal and its reduction;
 - 4. Cognitive restructuring;
 - 5. Relapse prevention;
 - 6. Partner and family interactions and support, if applicable;
 - 7. Victim empathy awareness; and
 - 8. Relationship skills; and
- (2) Provide a minimum of eighty (80) face-to-face sessions of at least forty-five (45) minutes for an individual session or ninety (90) minutes for a group session for at least twenty-four (24) months with a minimum of forty (40) face-to-face sessions conducted during the first twelve (12) months.
- Section 4. Procedures For Treatment of Sex Offenders Who Have Completed a Sex Offender Treatment Program. (1) If a sex offender has completed a sex offender treatment program, an approved provider shall:
- (a) Obtain documentation from the sex offender treatment program showing completion of the program;
- (b) Assess and document whether the offender can demonstrate acceptable levels of skills and knowledge of treatment areas listed in Section 3(1)(d) of this administrative regulation;
- (c) Require the offender to repeat the areas in Section 3(1)(d) of this administrative regulation in which he has not demonstrated competence; and
- (d) Provide a minimum of fifty (50) face-to-face sessions of at least forty-five(45) minutes for an individual session or ninety (90) minutes for a group session for at least eighteen (18) months with a minimum of forty (40) face-to-face sessions conducted during the first twelve (12) months;
- (2) If an offender has completed a sex offender treatment program, the approved provider shall use a treatment curriculum which, at a minimum, shall include:
 - (a) Dynamic risk factors assessment;
- (b) Basic ownership, which means a component for offender responsibility for sexual offending behavior;

- (c) Relapse prevention;
- (d) Development of treatment partner relationship, including partner alert sessions;
- (e) Collaborative development of a practical living skills plan;
- (f) Commitment to follow-up with adjunct therapies where needed, including the following: Substance abuse; Domestic violence; Anger management; and Psychotropic medications; and
 - (g) A plan for family and children reintegration.
 - (3) Reintegration.
- (a) Reintegration with a victim shall not comply with treatment requirements unless it is approved by the approved provider and the probation and parole officer.
- (b) If the offender victimized a child, reintegration with other children shall not comply with treatment requirements unless approved by the approved provider and the probation and parole officer.
- (c) The approved provider and probation and parole officer shall address at a minimum the following when considering reintegration of an offender with a child victim or other children:
 - 1. Assessment of age and sex of child victims and offender potential for cross-over;
- 2. Assessment of how the offender accessed prior child victims and similarities to situations and persons with whom he is currently considering to reside;
 - 3. Assessment of adult partner's knowledge and insight into offender's dynamics; and
 - 4. A gradual reintegration process plan.

Section 5. Incorporation by Reference. (1) The Sex Offender Risk Assessment Advisory Board form "Required Monthly Progress Report", 4/12/05, is incorporated by reference.

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